

A.C.N. 050 293 153

MULTIPLE COMPETITION REGISTRATION

Surname Name:	First Name:	
FFA Number: Date of Birth:	/ Ger	nder: Male / Female
Address:		
	Postcode:	
Phone No: Mobile No:	Email:	
Parent/Guardian Details (only to be completed if player is under 18 years of age)		
Surname Name:	First Names:	
Address:		
	Postcode:	
Email:	Phone No: N	Mobile No:
Secondary Registration Fee (12-18) \$25.00 (>18) \$50.00 Competition – Primary Registration (Lowest Graded Team) Competition – Secondary Registration – (Highest Graded Team) Terms: The Club and player (or if the player is under 18 years of age at the time of signing this form the Player's parent or legal guardian) agree: 1. the information on the form is current and correct; 2. to comply with FFA Statutes. Including the National Registration Regulations, Code of Conduct, Disciplinary Regulations and Grievance Resolution Regulations, copies of which are available on www.northernnswfootball.com.au 3. to comply with the Laws of the Game and the Competition Administrator's Competition Rules: 4. the player is an amateur as defined by FFA Statutes and does not receive any money or consideration for participating in football (other than reasonable participation expenses); 5. the Player must pay the Fees to the Club; 6. FFA, the Member Federation, the Competition Administrator and the Club (Football Administrators) may use the Player's name or image in any form or medium for general marketing and promotional activities; 7. there may be inherent risks associated with participating in football that may result in personal injury and the Player agrees to fully bear that risk; 8. not to bring any claim or proceeding against Football Administrators or availability to the Player in nor tor (including negligence), contract or bailment for acts or omissions of Football Administrators and their employees, agents or contractors; 9. the Member Federation of the Club will provide the Player with insurance to cover any injury sustained while participating in football activities for that Club in the scope and coverage as prescribed by that Member Federation. A copy of the insurance policy must be provided by the Member Federation on request, including applicable benefits (such as death and capital benefits, loss of income and non-medicare medical expenses), exclusions, maximum benefits and deductions; 10. to submit exclusi		
I hearby declare that I have read, fully understand and accept the Regulations of Macquarie Football Limited, particularly those applying to priority of allegiance to the team of Primary Registration. I hereby pledge to observe the Constitution and the Rules and Regulations of Macquarie Football Limited as well as any other relevant policy in existence at the same time.		
I declare this as a player of (Club)		
Player (print name): S	Signature:	Date:
Club Secretary (print name): S	Signature:	Date:

Office Use Only
Total Fee Paid: \$_